

# Reserve Health Readiness Program

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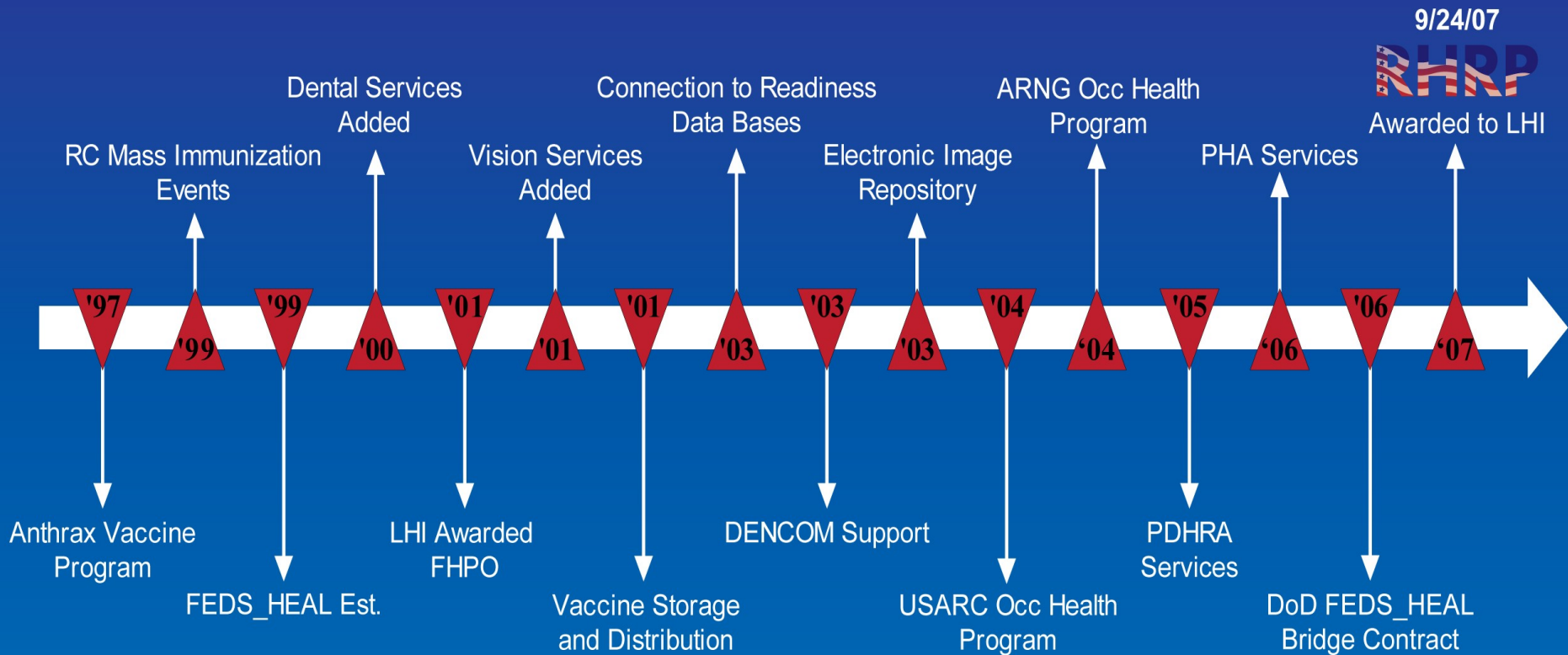
Senior Program Manager/COR, Reserve Health Readiness Program

Force Health Protection and Readiness

OASD (Health Affairs)



# History of Program



# RHRP Overview

- Formerly the FEDS\_HEAL Program
- Program is designed to supplement the Reserve Component's readiness mission by providing PHA, PDHRA, and other IMR services that satisfy key deployment requirements
- RHRP provides medical and dental services to all Reserve Component (RC) forces including the Army Reserve and National Guard, Air National Guard and Reserve, Navy Reserve, Marine Forces Reserve, and U.S. Coast Guard, as well as Periodic Health Assessment (PHA), Post Deployment Health Reassessment (PDHRA), and Individual Medical Readiness (IMR) services for Active Duty Service Members (SMs) located in geographically remote areas

# Program Highlights

- 5 year Physical Exam replaced by annual PHA
- Active Component
  - PHA, PDHRA, and IMR services available to SMs located in geographically remote areas
- On-Site Event
  - PHA and PDHRA minimums reduced to give RCs more flexibility in scheduling services
- Army Selected Reserve (SELRES) Dental Readiness
- In-Clinic Immunizations
- Readiness Systems
  - Medical Non-Deployable Module (MND) - Army
  - Health Readiness Record (HRR) - Army
  - DENCLASS - Army
  - Medical Readiness Reporting System (MRRS) - USCG
  - PHA Module - Army
  - SC-specific PDHRA systems (MEDPROS, PIMR, EDHA)

# RHRP Services



# Primary Services

<p>PHA (On-site &amp; In-clinic)</p>	<p>Dental Exam (w/bitewing x-ray)</p>	<p>Routine Immunizations (Hep A/B, T/D, Flu, Varicella)</p>
<p>PDHRA (On-site &amp; Call Center)</p>	<p>Panoramic X-ray</p>	<p>Other Immunizations (Typhoid, Anthrax, etc.)</p>
<p>Physical Exam (Chapt 3) &amp; Occupational Health Exams</p>	<p>Dental Treatment</p>	<p>TB Screening (Plant and Read)</p>
<p>Diagnostic Audio Evaluation.</p>	<p>Vision Screening</p>	<p>HIV, DNA, G6PD, CVSP</p>
<p>Pregnancy Test</p>	<p>Prescription Eye Exam</p>	<p>Medical Record Review</p>

- Services are provided through two channels:
  - In-clinic model, utilizes civilian clinics for individual appointments
  - On-site event model, providers are sent to unit locations to perform multiple services.
- Call Center
  - PHA
  - PDHRA

# The Two Basic Methods of Order Completion

## Individual In-Clinic

- 1) Individual AVS voucher (Army) submitted and approved by RC ordering authority or requests for services are submitted via fax or email
- 2) LHI assigns clinic within 50 miles, contacts Service Member for availability, and schedules appointment
- 3) LHI ships kit to SM's home with all voucher information, required forms, and directions to clinic
- 4) Service Member attends appointment and services administered
- 5) Clinic provider ships documents to LHI for Quality Assurance check and MEDPROS update (Army) or other identified SC databases
- 6) All pertinent documents returned to unit for entry into SM's medical record

## Mass Event

- 1) AVS Mass Event voucher (Army) created and approved by reserve component ordering authority or requests for services are submitted via fax or email
- 2) LHI confirms event information with unit POC(s), assigns mass event providers, and coordinates shipment of supplies and equipment to unit location
- 3) Event occurs, services administered
- 4) Documents shipped to LHI for QA and SC database update
- 5) Any changes to documents as a result of QA review will be submitted back to unit for entry into SMs' medical records





# Periodic Health Assessment (PHA)

## Policy and Deliverables

### DoD Health Affairs Policy 06-006

A routine, annual Periodic Health Assessment (PHA) will be performed for all members of the Selected Reserve (SELRES), as required by DoDD 6200.4 (Force Health Protection)

### PHA Deliverables

#### For the Service Member

- An overall assessment of current health and IMR deficiencies
- Identification of potential risk factors that could lead to decreased health
- Identification and recommendation of plan to minimize potential health risks
- Recommendations for treatment of current health problems

#### For the Unit

- PHA After Action Reports (AARs) at the end of each event detailing services performed, focused exam information
- Update of Service Members' medical readiness through completion of services and update of medical records
- Increased overall unit readiness

# Periodic Health Assessment

## PHA Process

1	<b>Initial Screening</b>	<ul style="list-style-type: none"> <li>▪ Demographics verified &amp; Health Assessment Tool completed</li> <li>▪ Vitals taken (Ht, Wt, BP, Vision Screen)</li> <li>▪ Updates in health status documented on DD2766</li> </ul>
2	<b>PHA Interview</b>	<ul style="list-style-type: none"> <li>▪ SM presents with results documented on Health Assessment Tool</li> </ul>
3	<b>Health Assessment Tool Review with Healthcare Provider</b>	<ul style="list-style-type: none"> <li>▪ Survey responses validated               <ul style="list-style-type: none"> <li>- Health Promotion Counseling based on Clinical Preventive Services guidelines (USPSTF)</li> </ul> </li> <li>▪ If deployed in prior year:               <ul style="list-style-type: none"> <li>- Review of mental health responses</li> <li>- If PDHA not performed, notify SC POC</li> <li>- If PDHRA not performed, give SM the PDH.RA Call Center number to complete assessment</li> </ul> </li> <li>▪ Problem Focused Exam (as necessary)               <ul style="list-style-type: none"> <li>- Follow up referral recommendations documented and reported to Unit POC</li> </ul> </li> <li>▪ Report Summaries Completed               <ul style="list-style-type: none"> <li>- USAR: PULHES assigned, profile if needed</li> </ul> </li> </ul>
4	<b>Cardiovascular Screening Program (CVSP) Services Evaluated</b>	<ul style="list-style-type: none"> <li>▪ Assessment of necessary SC-specific CVSP results</li> </ul>
5	<b>Conclude Medical Readiness Review and</b>	<ul style="list-style-type: none"> <li>▪ IMR Updates (completed/scheduled as needed)</li> </ul>

# Dental Services

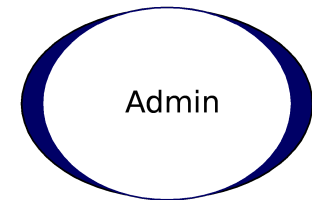
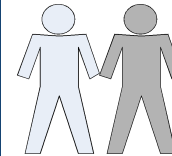
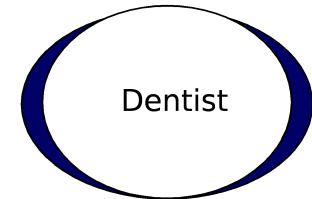
Dental Exams	4 Bitewing X-Rays
Panoramic X-Rays	Comprehensive Dental Treatment Management

# Annual Dental Exam On-Site Event Model

## Elements of the Annual Dental Exam

- **Record Screen:** Each Service Member's (SMs) dental records are initially screened to determine necessity of services
  - 10 Month rule: all SMs without a current dental exam within the past 10 months will receive a new dental exam (unless otherwise directed)
  - Bitewing Radiographs taken based upon previous dental readiness classification and caries risk.
  - Panoramic X-Ray: no time requirement, pano is good as long as it is of diagnostic quality and no major restorative Tx performed
- **Health History Completion:** SM answers questions regarding health history
- **Radiographs:** Each SM receives the x-rays indicated by the dental record screen
- **Dental Examination:** Each SM will be seen by a licensed dentist
  - Review of Health History and appropriate x-rays
  - Periodontal Screening and Recording
  - Charting of all dental disease
  - Classification designated (1, 2, or 3)
  - Original exam documents entered into SM's record
  - Blood Pressure evaluated
- **Exam QA:** All records are shipped to LHI and reviewed for completeness and accuracy of diagnosis
- **Database Update:** All records updated in the appropriate military database

## Typical On-site Event Team



# Comprehensive Dental Treatment Management

## Benefits of Individual Care

- A comprehensive service designed to manage each phase of the dental treatment process from the initial exam to completion of all dental class 3 treatment needs
  - Treatment plan identified by thorough dental examination
  - Scheduling center works with SM to find clinics within 50 mile radius
  - SM attends appointment(s); all records and x-rays sent to clinic by LHI
  - All dental services verified, paperwork QA'd, and database(s) updated
  - SM's dental readiness is upgraded to a deployable status
- LHI representatives work with individual units and individual SMs to identify specific requirements and pinpoint realistic outcomes
- All treatment completed in professional, civilian dental clinics
  - Clinics are best prepared to handle emergent situations
- In-clinic model allows units to use their drill weekends for training
  - SMs complete dental treatment during regular business hours M-F
- Complete dental treatment months rather than weeks or days in advance of deployment, avoiding last minute delays and cancellations
  - Identify class 3 soldiers prior to SRP; begin treatment process
  - SMs converted to deployable status prior to SRP

# Immunizations

## Routine Adult Immunizations

Hepatitis A	Hepatitis B	Tetanus-Diphtheria	Influenza
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## Routine In-Clinic Immunizations

Hepatitis A/B	Varicella	Tetanus-Diphtheria	Twinrix	TB	Influenza
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## Other Vaccinations Available Under RHRP

Typhoid	Anthrax (Gov.-Provided Vaccine)	Japanese Encephalitis	MMR	Meningococcal
Yellow Fever	Rabies	Inactivated Polio Vaccine	Pneumococcal	Sickle Cell

# Post-Deployment Health Reassessment (PDHRA) Policy and Deliverables

## DoD Health Affairs Policy 05-011

The Post-Deployment Health Reassessment (PDHRA) will be conducted for all personnel from 90 to 180 days after return to home station from a deployment

## PDHRA Deliverables

### For the Service Member

- An overall assessment of current medical and mental health
- Identification of potential risk factors
- Referral for evaluation of current medical or mental health issues or concerns
- Education about health risks and concerns
- Linkage to and utilization of military resources (MTF, VA, Vet Center, TRICARE, etc.) for evaluation of identified needs at no cost to the SM

### For the Unit

- PDHRA AARs at the end of each event detailing services performed and a list of referrals
- Increased overall unit readiness
- Proactive identification of potential risk factors for each SM within unit

# Post-Deployment Health Reassessment

## PDHRA Process

1	<b>DD2900 Completion</b>	<ul style="list-style-type: none"> <li>Service Member completes PDHRA Questionnaire</li> </ul>
2	<b>PDHRA Interview</b>	<ul style="list-style-type: none"> <li>Service Member meets with a licensed health care provider (HCP)</li> <li>HCP reviews the DD2900 for potential risk factors relating to medical and mental health concerns</li> <li>If requested by the HCP or the Service Member, a behavioral health specialist may be consulted regarding mental health concerns</li> <li>If Service Member displays any need for emergent care, the HCP will follow protocol to ensure all proper steps are taken to ensure the Service Member receives immediate care</li> </ul>
3	<b>Healthcare Provider Referrals</b>	<ul style="list-style-type: none"> <li>If the HCP identifies medical or mental health concerns that require attention, he/she will refer the Service Member to the appropriate entity for follow-up evaluation (MTF, VA, Vet Center, TRICARE) using appropriate SC form</li> <li>HCP provides education about any healthcare concerns</li> <li>For on-site events, the VA and Vet Center will be available to counsel the SM if they are referred to those resources</li> </ul>
4	<b>Reporting</b>	<ul style="list-style-type: none"> <li>Each Service Member will receive a copy of the documentation from their PDHRA</li> <li>The unit will receive a “Commander’s Report” which documents the results of the PDHRA for on-site and call center events</li> </ul>
5	<b>Follow-Ups</b>	<ul style="list-style-type: none"> <li>30 days after the PDHRA is complete (and a referral is made), LHI completes a follow-up call to ensure Service Member is getting the care that was recommended and provide additional linkage if needed</li> </ul>



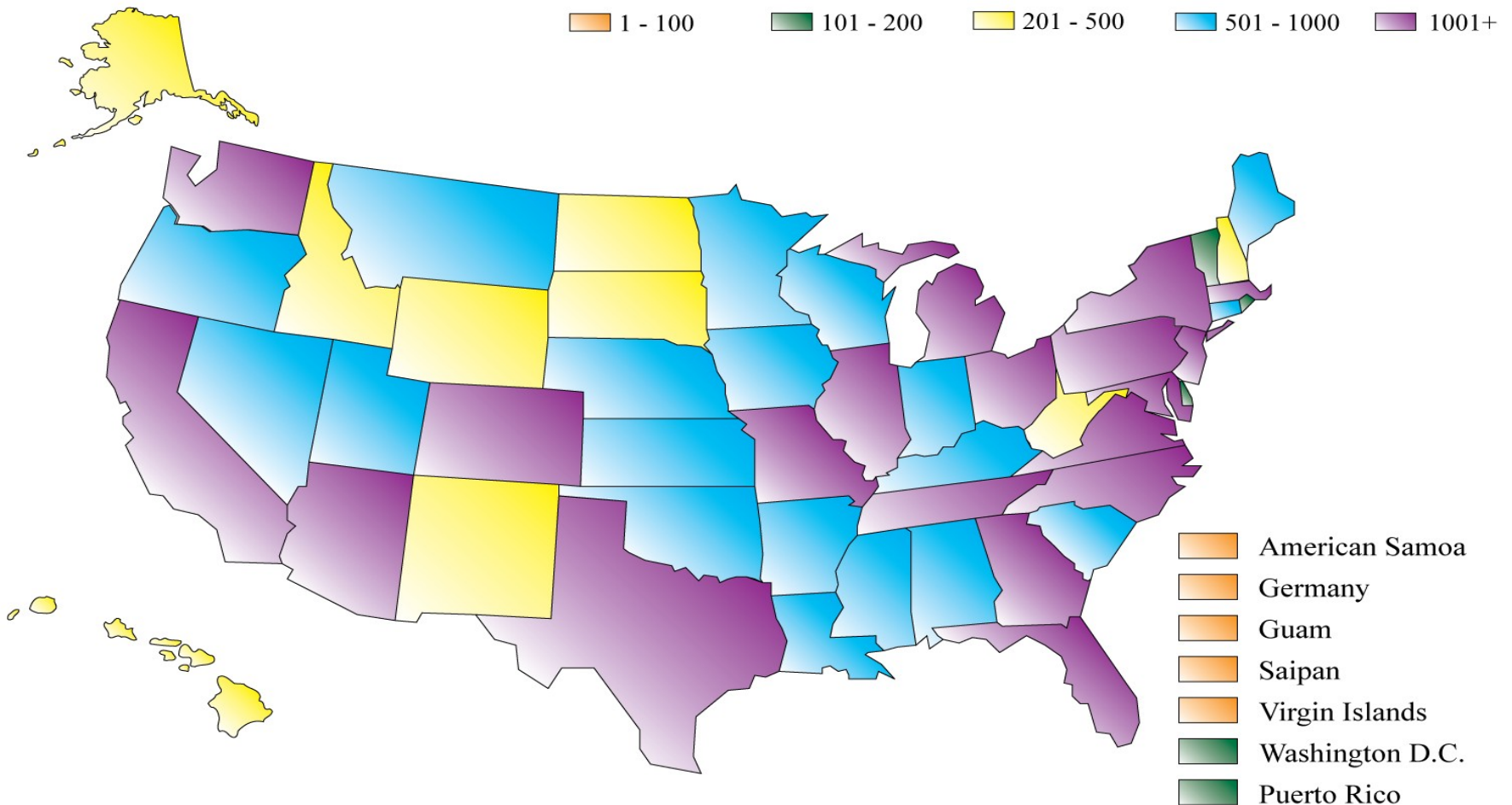
# Provider Network



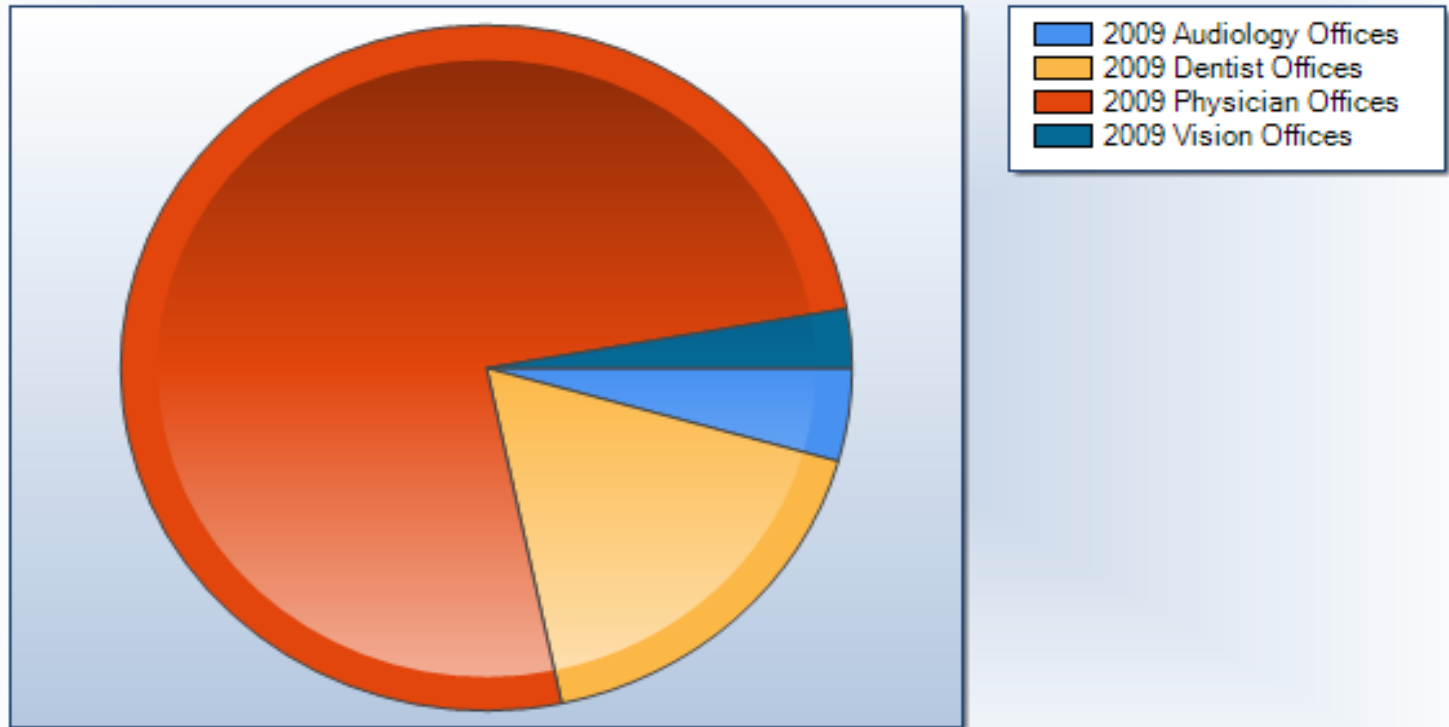
**Provider Database = 36,459**  
**Providers = 16,938**

**Active**

**Provider Distribution**



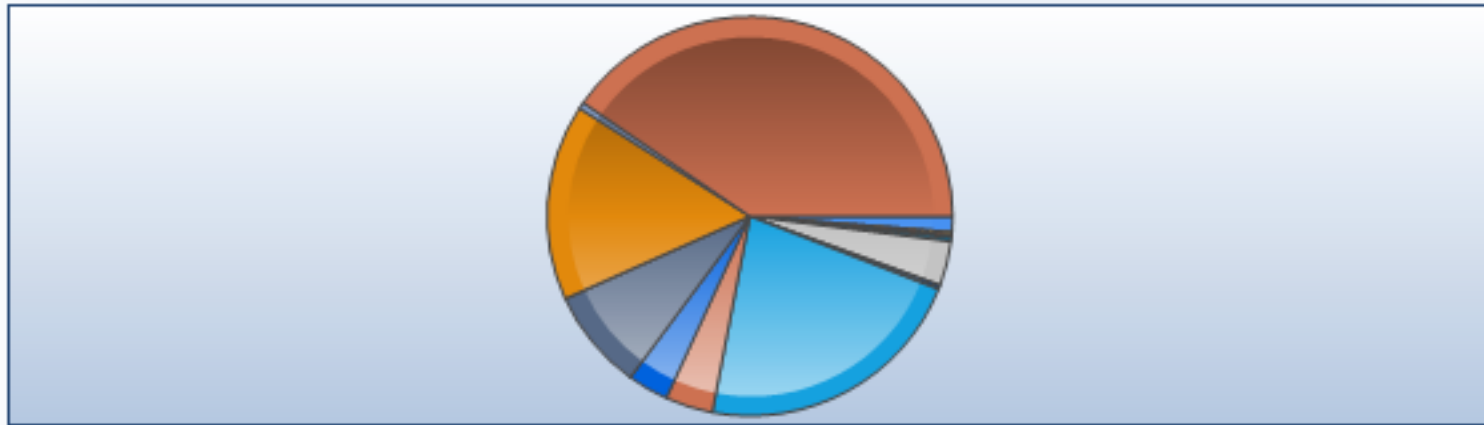
## The In- Office Network totals 10,800 Active Provider Locations



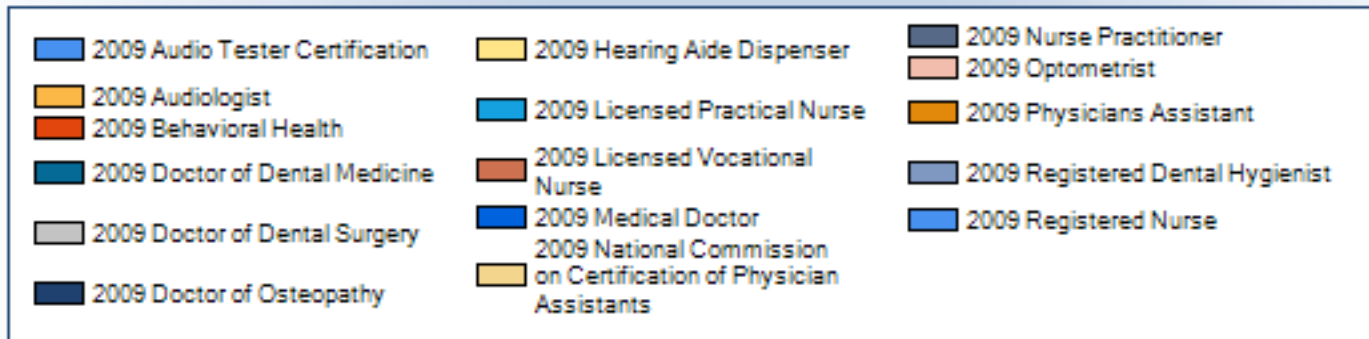
InClinicLocationCount

<b>8,086</b>	<b>Physician Offices</b>	<b>1,919</b>	<b>Dentist Offices</b>
<b>500</b>	<b>Audiology Offices</b>	<b>295</b>	<b>Vision Offices</b>

## The On-Site Network consists of 6,807 Active Licensed HCP's



License Count



**Behavioral Health 259**

**LPN/LVN 1,731**

**PA 892**

**DMD/DDS 280**

**RN 2,639**

**NP 491**

**280 Hearing**

**MD/DOS 245**

**RDH 38**

- PDHRA funded by GWOT
  - Reserve Component
    - TMA distributes funding to RHRP
  - Active Component
    - FAD to RHRP request
    - TMA move AC funds to RHRP
  
- PHA and IMR services funded by SC
  - Direct cite MIPR to RHRP

# RHRP Providers

## Training Guidelines

- All RHRP providers follow DoD and specific military standards
- All providers are trained to handle emergent situations
  - Providers must have at minimum a Basic Lifesaving Certification
  - Providers trained on emergency protocol, unusual incident reporting, as well as the Vaccine Adverse Event Reporting System (VAERS) when administering vaccine
- All training provided by LHI's qualified and experienced staff of certified medical and dental practitioners

## Overall RHRP Program Value

- Network of trained and accountable providers located throughout the U.S.
- Services available individually or through group events
- Immediate access to a Service-centric program
- Increase in IMR compliance and data fidelity
- Increase in unit readiness and decrease in mobilization of non-ready personnel
- Connectivity to SC medical readiness and clinical information systems
- Increased continuity of medical and dental records
- Command reporting and cost tracking

# RHRP Services Delivered







# RHRP Services (FY 08 - FY 09)

\* As of May 30, 2009

<b>Service</b>	<b>FY 08</b>	<b>FY 09*</b>	<b>Total</b>
<b>Physical Exams</b>	18,630	4,441	23,071
<b>PHAs</b>	20,188	108,730	128,918
<b>Dental Exams</b>	153,103	128,517	281,620
<b>Panorex</b>	31,325	20,559	51,884
<b>Bitewings</b>	150,231	126,233	276,464
<b>Blood Draws (HIV, G6PD)</b>	71,709	55,455	127,164
<b>Anthrax</b>	10,553	13,108	23,661
<b>Immunizations</b>	162,681	151,139	313,820
<b>Vision Screen</b>	76,998	101,218	178,216
<b>Audio</b>	70,124	57,672	127,796
<b>PDHRA</b>	109,914	75,797	185,711
<b>Total Services</b>	765,542	767,072	1,532,614

**SMs receiving services = 270,437 (10/08 to**

**5/09)**

# Contact Information

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# QUESTIONS

